STATEMENT OF

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FORM 1	ORGANIZATION				FEC MAIL CENTER	
NAME OF COMMITTEE (in	n full)	(Check is chan	if name ged)	Example:If typing, type over the lines.	12FE4M5	
OREGON	REPL	BLICAN	EXEC	JTIVE BOARD		
		1 1 1 1 1		<u> </u>		
ADDRESS (number a	nd street)	P. O. B	OX 667	313		
(Check if address is changed)		POMPA	NO BE	ACH	FL	33066
			CI	TY	STATE	ZIP CODE
COMMITTEE'S E-MA	address			ail address) ExecutiveBoard	ds@gma	ail,com
COMMITTEE'S WEE	PAGE ADE	PRESS (URL)				
(Check if address is changed)						
2. DATE 11	l [™] ′ 10	[®] ′ 2012	*			
3. FEC IDENTIFIC	CATION NU	IMBER	С			
4. IS THIS STATE	MENT 🔀	NEW (N)	OR	AMENDED (A)		
I certify that I have	examined th	is Statement and	to the best o	f my knowledge and belief it	is true, correct	and complete.
Type or Print Name	of Treasure	PETER	RSON T	RUMP		
Signature of Treasur	er	Clerson	Tamp	2	Date 11	10° ′ 20′12 ′
NOTE: Submission of		•		ay subject the person signing to SHOULD BE REPORTED W		the penalties of 2 U.S.C. §437g.
Office Use Only				For further Information of Federal Election Commission Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)